
Season Ticket Application

Season subscriptions are good for 6 CONSECUTIVE productions and you may start the subscription with the show of **your choice**.

PLEASE ALLOW 4 WEEKS FOR PROCESSING YOUR ORDER.

Please Circle One:

Jan/Feb Mar/Apr May/June July/Aug Sept/Oct Nov/Dec

Please send me _____ subscriptions at \$80.00 each Total: _____

NAME	
ADDRESS	APT
CITY and ZIP	TEL ()

Make check or money order payable to KENTWOOD PLAYERS.

Mail to: Kentwood Players Attn: Season Tickets
8301 Hindry Avenue Los Angeles, CA 90045.

PLEASE ENCLOSE A STAMPED SELF-ADDRESSED ENVELOPE.

If you would prefer to pay with a credit card, please call the box office for assistance: (310) 645-5156

